



Division of Laboratory Services
630 Hart Lane
Nashville, TN 37216
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

Disease/Agent Suspected or Test Requested:

***Neisseria gonorrhoeae*, culture**

Provider Requirements	
Acceptable Specimen Sources/Type(s) for Submission	Pure culture isolate and/or clinical specimens from cervical, urethral, rectal, throat, and eye swabs.
TDH Requisition Form Number	PH-4182
Media Requirements	InTray Transport Media, Martin Lewis Media, or Chocolate plate/slant.
Special Instructions	The culture should be allowed to grow on media and incubated at 35-37°C plus 5% carbon-dioxide (CO ₂) for 18-20 hours prior to shipping.
Shipping Instructions	Ship in CO ₂ or InTray transport system.
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).